

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

American Society of Pension Professionals &amp; Actuaries PAC

ADDRESS (number and street)

4245 N. Fairfax Drive

Suite 750

☐ Check if different than previously reported. (ACC)

Arlington

VA

22203

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00333104

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☒ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election  
Report for the:☐ Primary (12P)☐ General (12G)☐ Runoff (12R)☐ Convention (12C)☐ Special (12S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election  
Report for the:☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M / D D D / Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M / D D D / Y Y Y Y Y Y  
03 01 2012

through

M M M / D D D / Y Y Y Y Y Y  
03 31 2012

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Brian H. Graff

Signature of Treasurer

Brian H. Graff

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y  
04 18 2012

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

American Society of Pension Professionals &amp; Actuaries PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
03 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y  
03 / 31 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2012</span>		<span style="border: 1px solid black; padding: 2px;">112690.06</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">113874.60</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">18794.00</span>	<span style="border: 1px solid black; padding: 2px;">33104.00</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">132668.60</span>	<span style="border: 1px solid black; padding: 2px;">145794.06</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">18204.65</span>	<span style="border: 1px solid black; padding: 2px;">31330.11</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">114463.95</span>	<span style="border: 1px solid black; padding: 2px;">114463.95</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

American Society of Pension Professionals &amp; Actuaries PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	2

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	2

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	15925.00	29550.00
(ii) Unitemized .....	1869.00	2554.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ►	17794.00	32104.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	17794.00	32104.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	1000.00	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	18794.00	33104.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	18794.00	33104.00

# **DETAILED SUMMARY PAGE** of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	204.65	830.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	204.65	830.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18000.00	30500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	18204.65	31330.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18204.65	31330.11

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	17794.00	32104.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	17794.00	32104.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	204.65	830.11
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	204.65	830.11

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. Jeffery Acheson**

Mailing Address 41 S High St Ste 2100

City State Zip Code  
Columbus OH 43215-6102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Schneider Downs Wealth Management Advi

Occupation

INVESTMENT ADVISOR

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 22 / 2012

**Transaction ID : C1637819**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. Lucian Acuff**

Mailing Address 210 Westwood Pl  
Ste 100

City State Zip Code  
Brentwood TN 37027-7554

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Acuff & Associates, Inc.

Occupation

PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 16 / 2012

**Transaction ID : C1637797**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. Jason Chepenik**

Mailing Address 1010 Orange Avenue

City State Zip Code  
Winter Park FL 32789-4709

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Chepenik Financial

Occupation

FINANCIAL PLANNER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2012

**Transaction ID : C1637831**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

3250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. Jim Comer**

Mailing Address 5250 77 Center Dr Ste 450

City State Zip Code  
Charlotte NC 28217-0709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Alliance Benefit Group Carolinas

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 08 / 2012

**Transaction ID : C1637833**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. Stephen L Dobrow**

Mailing Address 875 Mahler Road, Suite 105

City State Zip Code  
Burlingame CA 94010-1615

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Primark Benefits

Occupation  
Pension consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 22 / 2012

**Transaction ID : C1637813**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Sheri Fitts**

Mailing Address 9785 Town Centre Drive

City State Zip Code  
San Diego CA 92121

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LPL Financial Retirement Partners

Occupation  
VICE PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 01 / 2012

**Transaction ID : C1637789**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

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FOR LINE NUMBER: PAGE 8 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

## **A. Mike Freedman**

Mailing Address 30400 Telegraph Rd Ste 440

City State Zip Code  
Bingham Farms MI 48025-4541

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Freedman Benefits Group, Inc.

Occupation  
PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 30 / 2012

Transaction ID : C1637826

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Sheldon Geller**

Mailing Address 1 Westgate Rd

City State Zip Code  
Syosset NY 11791

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Information Requested

Occupation  
ATTORNEY

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 19 / 2012

Transaction ID : C1637798

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. Thomas H Gellman**

Mailing Address 1125 NE 125th Street  
Suite 250

City State Zip Code  
North Miami FL 33161-5014

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ERISA Pension Systems

Occupation  
Pension consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2012

Transaction ID : C1637810

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00



# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

American Society of Pension Professionals & Actuaries PAC

Full Name (Last, First, Middle Initial)

A. Joseph M Gordon

Mailing Address 1007 Slater Road, Suite 200

City State Zip Code  
Durham NC 27703-8057

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Gordon Smith Pension Advisors

Occupation

Pension consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 01 / 2012

Transaction ID : C1637784

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

B. Marybeth Herbage

Mailing Address 6444 E Spring Street

City State Zip Code  
Long Beach CA 90815

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Pension Administration Mgmt

Occupation

President

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2012

Transaction ID : C1637791

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

c. Craig P Hoffman

Mailing Address 1660 Prudential Drive  
Suite 400

City State Zip Code  
Jacksonville FL 32207

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SunGard Corbel

Occupation

Pension consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 05 / 2012

Transaction ID : C1637792

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 10 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. John G. Hopkins**

Mailing Address 12 Chelton Circle

City

Camp Hill

State

PA

Zip Code

17011

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Alliance Benefit Group

Occupation

Executive Director

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2012

**Transaction ID : C1637806**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**B. DeNoyior Joseph**

Mailing Address 1410 Spring Hill Road Suite 425

City

Mc Lean

State

VA

Zip Code

22102

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Washington Financial Group

Occupation

Information Requested

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2012

**Transaction ID : C1637803**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**c. Kyla Marie Keck**

Mailing Address Post Office Box 32999

City

Knoxville

State

TN

Zip Code

37919-4005

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retirement Plan Consultants

Occupation

Pension consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2012

**Transaction ID : C1637804**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. Michele C Kocak**

Mailing Address 3030 Pebble Beach Drive

City State Zip Code  
 Ellicott City MD 21042-2113

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Michele C Kocak, CPC, QPA

Occupation

Pension consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 05 / 2012

**Transaction ID : C1637790**

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**B. Yannis Koumantaros**

Mailing Address 6402 19th Street W

City State Zip Code  
 Tacoma WA 98466-6130

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Spectrum Pension Consultants

Occupation

Pension consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 20 / 2012

**Transaction ID : C1637805**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Stephanie Kouretsos**

Mailing Address 3001 Louisiana Blvd E

City State Zip Code  
 Albuquerque NM 87110-2734

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retirement Consultants, Ltd.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 03 / 30 / 2012

**Transaction ID : C1637827**

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1250.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 12 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. Daniel G Kravitz**

Mailing Address 15760 Ventura Blvd, Suite 910

City State Zip Code  
Encino CA 91436-3000

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Louis Kravitz & Associates, In

Occupation

Pension consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2012

**Transaction ID : C1637808**

Amount of Each Receipt this Period

750.00

Full Name (Last, First, Middle Initial)

**B. Chuck Lax**

Mailing Address 28400 Northwestern Hwy Fl 3

City State Zip Code  
Southfield MI 48034-8348

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Maddin, Hauser, Wartell, Roth & Heller

Occupation

ATTORNEY

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 29 / 2012

**Transaction ID : C1637822**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Patricia M Monju**

Mailing Address 400 Poydras Street  
Suite 1840

City State Zip Code  
New Orleans LA 70130-3245

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Horne Business Services, LLC

Occupation

Pension consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 20 / 2012

**Transaction ID : C1637799**

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1500.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 13 OF 20

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

## **A. Kory Ngo**

Mailing Address 1971 E 4th St Ste 100

City

Santa Ana

State

CA

Zip Code

92705-3917

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Benefit Equity, Inc.

Occupation

VICE PRESIDENT

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 05 / 2012

Transaction ID : C1637793

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

## **B. Kasey Price**

Mailing Address 3736 Executive Center Dr

City

Augusta

State

GA

Zip Code

30907-2360

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Retirement Strategies, Inc.

Occupation

PRESIDENT

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1250.00

Date of Receipt

03 / 20 / 2012

Transaction ID : C1637809

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

## **C. Robert M Richter**

Mailing Address 1660 Prudential Drive, Suite 400

City

Jacksonville

State

FL

Zip Code

32207-8197

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SunGard Corbel

Occupation

Pension consultant

Receipt For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

03 / 12 / 2012

Transaction ID : C1637794

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1750.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 OF 20  
(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. Richard A. Shulman**

Mailing Address 10777 Westheimer Road

City State Zip Code  
Houston TX 77042

FEC ID number of contributing  
federal political committee.

C

Name of Employer

National Actuarial Pension Ser

Occupation

President & Chief Actuary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 26 / 2012

**Transaction ID : C1637820**

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B. Sarah E Simoneaux**

Mailing Address 160 Lochmere Drive

City State Zip Code  
Mandeville LA 70471-1112

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Actuarial Systems Corporation

Occupation

Pension consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 20 / 2012

**Transaction ID : C1637807**

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

**C. Lynn M Young**

Mailing Address 2415 E Cambelback Road  
Suite 960

City State Zip Code  
Phoenix AZ 85016-4209

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Coble Pension Group, LLC

Occupation

Pension consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 08 / 2012

**Transaction ID : C1637834**

Amount of Each Receipt this Period

125.00

**SUBTOTAL** of Receipts This Page (optional)..... ►

925.00

**TOTAL** This Period (last page this line number only)..... ►

15925.00

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 15 OF 20

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. SNOWE FOR SENATE**

Mailing Address PO BOX 2012

City

PORTLAND

State

ME

Zip Code

04104

FEC ID number of contributing  
federal political committee.

C

C00291955

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
03 / 10 / 2012

**Transaction ID : C1616988**

Amount of Each Receipt this Period

1000.00

Refund of check dated 2//6 for Primary

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

1000.00

1000.00

<input checked="" type="checkbox"/>	21b	<input type="checkbox"/>	22	<input type="checkbox"/>	23	<input type="checkbox"/>	24	<input type="checkbox"/>	25	<input type="checkbox"/>	26
<input type="checkbox"/>	27	<input type="checkbox"/>	28a	<input type="checkbox"/>	28b	<input type="checkbox"/>	28c	<input type="checkbox"/>	29	<input type="checkbox"/>	30b

American Society of Pension Professionals & Actuaries PAC

59.58

Category/  
Type

145.07

Category/  
TypeCategory/  
Type

204.65

204.65



**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 17 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. Citizens for Josh Mandel**

Mailing Address 50 WEST BROAD STREET SUITE 1900

City	State	Zip Code
Columbus	OH	43215

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	06	/	2012

**Transaction ID : D127512**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. MONTANA DEMOCRATIC PARTY**

Mailing Address PO Box 802

City	State	Zip Code
Helena	MT	59624

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012

☒ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	22	/	2012

**Transaction ID : D127450**

Amount of Each Disbursement this Period

2500.00
---------

Full Name (Last, First, Middle Initial)

**C. NTSAA PAC**Mailing Address 4245 North Fairfax Drive  
Suite 750

City	State	Zip Code
Arlington	VA	22203

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2012

☐ Primary ☒ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	08	/	2012

**Transaction ID : D127491**

Amount of Each Disbursement this Period

5000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9500.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 18 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. KLINE FOR CONGRESS**

Mailing Address 101 W BURNSVILLE PKWY SUITE 104

City BURNSVILLE	State MN	Zip Code 55337
--------------------	-------------	-------------------

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. John Kline**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	16	/	2012

**Transaction ID : D127464**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. RICHARD E NEAL FOR CONGRESS COMMITTEE**

Mailing Address 76 MAGNOLIA TERRACE

City SPRINGFIELD	State MA	Zip Code 01107
---------------------	-------------	-------------------

Purpose of Disbursement  
Contribution to federal comm

Candidate Name

**Rep. Richard E. Neal**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	15	/	2012

**Transaction ID : D127449**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**C. GRAVES FOR CONGRESS**

Mailing Address PO BOX 335

City CALHOUN	State GA	Zip Code 30703
-----------------	-------------	-------------------

Purpose of Disbursement  
Contribution

Candidate Name

**Rep. Tom Graves**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	27	/	2012

**Transaction ID : D127465**

Amount of Each Disbursement this Period

1000.00
---------

**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

3000.00
---------

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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 19 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**American Society of Pension Professionals & Actuaries PAC**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF JOHN BARRASSO**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		02		2012

Mailing Address PO BOX 52008

City	State	Zip Code
CASPER	WY	82605

**Transaction ID : D127451**Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

Candidate Name

**Sen. John Barrasso**Category/  
Type

1000.00
---------

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WY District:

Full Name (Last, First, Middle Initial)

**B. TIBERI FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		20		2012

Mailing Address 217 Third Street S.E

City	State	Zip Code
Washington	DC	20003

**Transaction ID : D127461**Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1000.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. TIBERI FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		27		2012

Mailing Address 217 Third Street S.E

City	State	Zip Code
Washington	DC	20003

**Transaction ID : D127467**Purpose of Disbursement  
Contribution

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1000.00
---------

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2012
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00
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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

American Society of Pension Professionals & Actuaries PAC

## A. TIBERI FOR CONGRESS

Date of Disbursement

Transaction ID : D127463

Category/  
Type

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

## B. Tom Reed for Congress

Date of Disbursement

MM / DD / YYYY

Transaction ID : D127462

Category/  
Type

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

Amount of Each Disbursement this Period

**C.**

Date of Disbursement

City	State	Zip Code
------	-------	----------


Category/  
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

2500.00

18000.00